

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		<b>Attorney Docket Number</b>	FISHER
		<b>First Named Inventor</b>	Mazlin B. GHAZALI
<b>COMPLETE IF KNOWN</b>			
		<b>Application Number</b>	10/586,169
		<b>Filing Date</b>	07/17/2006
		<b>Group Art Unit</b>	
		<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**A METHOD OF SUBDIVIDING A PLOT OF LAND FOR HOUSING  
AND A HOUSING SUBDIVISION SO FORMED**

*(Title of the Invention)*

the specification of which

- is attached hereto  
 OR  
 was filed on January 13, 2005 as United States Application Number or PCT International Application Number PCT/AU2005/000030 and was amended on March 13, 2006 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 37, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any *foreign application* for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
2004900191	AUSTRALIA	01/16/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YYYY)

## DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT International Application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
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PCT/AU2005/000030	01.13.2005	—
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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number \_\_\_\_\_  
OR

Registered Practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
JAMES C WRAY ROBERT W GIBSON	22693 57145		

Direct all correspondence to:

Customer Number \_\_\_\_\_ OR  Correspondence address below

Name	LAW OFFICES OF JAMES C WRAY				
Address	1493 Chain Bridge Road, Suite 300				
Address					
City	McLean	State	Virginia	ZIP	22101
Country	USA	Telephone	703 442 4800	Fax	703 448 7397

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname			
MAZLIN B.		GHAZALI			
Inventor's Signature	<i>M. M.</i>			Date	12th July 2006
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